

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

GUN RIGHTS AMERICA

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="8153.90"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="115313.07"/>	<input type="text" value="148704.09"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="123466.97"/>	<input type="text" value="148704.09"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="27983.78"/>	<input type="text" value="53220.90"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="95483.19"/>	<input type="text" value="95483.19"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="1449.94"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

GUN RIGHTS AMERICA

Report Covering the Period: From: M M / D D / Y Y Y Y 09 / 01 / 2020 To: M M / D D / Y Y Y Y 09 / 30 / 2020

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	42870.00	75465.02
(ii) Unitemized	47443.07	48239.07
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	90313.07	123704.09
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	25000.00	25000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	115313.07	148704.09
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	115313.07	148704.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	115313.07	148704.09

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	897.62	1895.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	897.62	1895.69
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	27086.16	51325.21
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	27983.78	53220.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27983.78	53220.90

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	115313.07	148704.09
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	115313.07	148704.09
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	897.62	1895.69
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	897.62	1895.69

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. ALDERSON, DAN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1127 BUFFALO WILSON RD

City COLVILLE	State WA	Zip Code 99114
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
----------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2020

Transaction ID : ADF2CCDD7AC2C4F6F81F

Amount of Each Receipt this Period
1000.00

Memo Item

B. BELTZNER, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 602 ORANGE ST

City ARLINGTON	State TX	Zip Code 76012
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VANDERGRIF	Occupation (for Individual) MACH
-------------------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2020

Transaction ID : A9473B1F5FA7246EAA60

Amount of Each Receipt this Period
1500.00

Memo Item

C. BINGER, BRUCE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1171 MILTON ST

City BENTON HARBOR	State MI	Zip Code 49022
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) B AND Z COMPANY	Occupation (for Individual) CONSTRUCTION
------------------------------------------------------	---------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2020

Transaction ID : ADFEDB9E234564BA281B

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. BOCKHAUS, LARRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1410 W 11TH ST UNIT 2
 City ALAMOSA State CO Zip Code 81101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2020
Transaction ID : AD640BCBA7CB84D6E82F
 Amount of Each Receipt this Period 250.00
 Memo Item

B. BODILY, ELDEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 57654
 City SALT LAKE CITY State UT Zip Code 84157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 14 / 2020
Transaction ID : A0C1DA9E7FEC4430A9CB
 Amount of Each Receipt this Period 500.00
 Memo Item

C. BODILY, ELDEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 57654
 City SALT LAKE CITY State UT Zip Code 84157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 21 / 2020
Transaction ID : ADE6622A752B643A3B5B
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. BRINSTER, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12849 49TH ST SW
 City BELFIELD State ND Zip Code 58622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 21 / 2020
Transaction ID : A8C66D30730564AC788A
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. BROAD, GARY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20850 MOXON DR
 City CLINTON TOWNSHIP State MI Zip Code 48036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MIDWEST STEEL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 09 / 21 / 2020
Transaction ID : A878D6F63561B4366A14
 Amount of Each Receipt this Period 3000.00
 Memo Item

C. CASTO, DALE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4801 J M TURK RD
 City FLOWERY BRANCH State GA Zip Code 30542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 17 / 2020
Transaction ID : A3494E04424EB46F693C
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. CHACON, BEULAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 787
 City BISHOP State CA Zip Code 93515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 09 / 14 / 2020
Transaction ID : AA7F51112BDA94FA9A11
 Amount of Each Receipt this Period 3000.00
 Memo Item

B. COPE, ALAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24915 STATE ROUTE 62
 City ALLIANCE State OH Zip Code 44601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COPE FARM EQUIPMENT Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2020
Transaction ID : A28B977E64DB34CF096B
 Amount of Each Receipt this Period 250.00
 Memo Item

C. CORRENTI, DAWN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 808 E MAIN ST
 City BLYTHEVILLE State AR Zip Code 72315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 15 / 2020
Transaction ID : A19BF27DD04D04413864
 Amount of Each Receipt this Period 400.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. COYNE, JEROME, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7825 W 400 N
 City MICHIGAN CITY State IN Zip Code 46360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 21 / 2020
Transaction ID : AFEA69B6671804ED2B0E
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. EYMAR, PAUL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4910 BOULDER TRACE LANE
 City KATY State TX Zip Code 77449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2020
Transaction ID : A593258A8E6024129AB3
 Amount of Each Receipt this Period 250.00
 Memo Item

C. FAUTH, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4292 W 14TH STREET DR
 City GREELEY State CO Zip Code 80634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2020
Transaction ID : A5C5B90559DCF4C97948
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. FLANSBURG, REX, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **PO BOX 266**

City CLINTON	State MT	Zip Code 59825
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
-----------------------------------------------------	-----------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
09 / 17 / 2020

Transaction ID : A7416E640CD4F464EA8C

Amount of Each Receipt this Period
220.00

Memo Item

B. GALBAY, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **47975 259TH ST**

City BRANDON	State SD	Zip Code 57005
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) LANDSCAPER
-------------------------------------------------------------------	--------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 15 / 2020

Transaction ID : AA010BCADB86C40FFBB2

Amount of Each Receipt this Period
300.00

Memo Item

C. GAMER, JERROLD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **223 SCENIC VIEW LN**

City PORT LUDLOW	State WA	Zip Code 98365
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
-----------------------------------------------------	-----------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 / 14 / 2020

Transaction ID : A1C6DF1D789B449BF82B

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1020.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. GRABER, GLENN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7716 N 900 E

City MONTGOMERY	State IN	Zip Code 47558
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) INFORMATION REQUESTED
----------------------------------------------------	------------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2020
Transaction ID : AFE8E36EF894D4051974

Amount of Each Receipt this Period
 500.00

Memo Item

B. JOHNS, ARCHIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3225 ANNISTON RD

City JACKSONVILLE	State FL	Zip Code 32246
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOHNS, INC	Occupation (for Individual) CONTRACTOR
-------------------------------------------------	-------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2020
Transaction ID : AECFE548EDC0324F44A7B

Amount of Each Receipt this Period
 500.00

Memo Item

C. JONES, ETHAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 402

City TOK	State AK	Zip Code 99780
-------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
----------------------------------------------	----------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2020
Transaction ID : A16DB4C887EFB4306B50

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. KEIM, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2200 VIA IRIS
 City SAN CLEMENTE State CA Zip Code 92673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ORANGE COUNTY FIRE AUTHORITY Occupation (for Individual) FIRE CAPTAIN, RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2020
Transaction ID : A6DE81BF7C04C4F28B2D
 Amount of Each Receipt this Period 500.00
 Memo Item

B. KNUPEL, HERMAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 SIOUX TRL
 City TULAROSA State NM Zip Code 88352-9680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 15 / 2020
Transaction ID : AD140B677316E4EFB9C7
 Amount of Each Receipt this Period 2000.00
 Memo Item

C. LEACH, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10220 N CLEAR LAKE RD
 City MILTON State WI Zip Code 53563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2020
Transaction ID : A8E9DE7B54F6745F2B46
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2750.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. LIVI, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5622 BRIAR DR
 City ORLANDO State FL Zip Code 32819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ECONOMIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 17 / 2020
Transaction ID : A6B1DB4808D4C4B719BB
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. LOEKEN, WILFRID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13800 SOMERSET BLVD SE
 City BELLEVUE State WA Zip Code 98006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2020
Transaction ID : A0E210679571E43258E2
 Amount of Each Receipt this Period 250.00
 Memo Item

C. LYSTER, THEODORE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 28
 City BEND State OR Zip Code 97709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2020
Transaction ID : AD7F2DE94B61C49CD880
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. MCLAY, BETTY LOU, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 136 WALNUT LN
 City WEST NEWTON State PA Zip Code 15089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2020
Transaction ID : AD91593A1C69E47EE92C
 Amount of Each Receipt this Period 250.00
 Memo Item

B. MCWHORTER, MORTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 656 HIGHWAY 94
 City ALEDO State IL Zip Code 61231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ILLINOIS DEPARTMENT OF TRANSPORTATION Occupation (for Individual) HIGHWAY MAINTENANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 14 / 2020
Transaction ID : AC7B1BB9D2ABF4A51AC0
 Amount of Each Receipt this Period 300.00
 Memo Item

C. MITCHELL, SHEILA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1363 W HIGHWAY 12
 City GENTRY State AR Zip Code 72734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 24 / 2020
Transaction ID : A796AF374597349BFA01
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. MULLER, JOSHUA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 707 STATE RT. 725 RD. PMB 411
 City DAYTON State OH Zip Code 45459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 17 / 2020
Transaction ID : A88330E59446A43928D4
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. OLSON, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 592 CRAWFORD DR
 City SUNNYVALE State CA Zip Code 94087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2020
Transaction ID : A746389D7F1814221BC3
 Amount of Each Receipt this Period 500.00
 Memo Item

C. PUSTA, LENORA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 138 W SUNFLOWER DR
 City PAYSON State AZ Zip Code 85541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 09 / 15 / 2020
Transaction ID : AA1270A677C164439845
 Amount of Each Receipt this Period 15000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	16500.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. RAULERSON, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5926 COLLEGE AVE
 City BLACKSHEAR State GA Zip Code 31516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LIN/FE Occupation (for Individual) DETRO DISTRICT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 24 / 2020
Transaction ID : AEA740B6D0F264C7D98F
 Amount of Each Receipt this Period 250.00
 Memo Item

B. RENTZ, FRANCIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 DOUGLAS DR
 City BAINBRIDGE State GA Zip Code 39819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 03 / 2020
Transaction ID : AA6B838AD76EA4B5E8DB
 Amount of Each Receipt this Period 250.00
 Memo Item

C. SCHOEFER, LOGAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1054
 City COTTONWOOD State CA Zip Code 96022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOLLIS INC. Occupation (for Individual) LABORER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 17 / 2020
Transaction ID : A7200D4CECA614AF8AF6
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. SHEIPE, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 484 E CARMEL DR # 311
 City CARMEL State IN Zip Code 46032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 14 / 2020
Transaction ID : AAAA802CCC73242CEA4C
 Amount of Each Receipt this Period 300.00
 Memo Item

B. SMALTZ, DONALD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5795 CLARENS CT
 City RENO State NV Zip Code 89511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 21 / 2020
Transaction ID : A544F0F10C5564FAAAD7
 Amount of Each Receipt this Period 300.00
 Memo Item

C. SMITH, JERRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12104 W STANFORD DR
 City MORRISON State CO Zip Code 80465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 11 / 2020
Transaction ID : AA219E6201891463C9A4
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. SMITH, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4951 COUNTY ROAD 6
 City BISHOP State TX Zip Code 78343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 17 / 2020
Transaction ID : A4726980C15FE42A295B
 Amount of Each Receipt this Period 500.00
 Memo Item

B. THORNTON, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4165 SINCLAIR SHORES ROAD
 City CUMMING State GA Zip Code 30041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 23 / 2020
Transaction ID : A4041088261F14D6B805
 Amount of Each Receipt this Period 250.00
 Memo Item

C. TORKELSON, STANLEY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 311 E STRIPED OWL DR
 City KUNA State ID Zip Code 83634
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOEING Occupation (for Individual) INSPECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2020
Transaction ID : ABE1099E1ABCD40B9A27
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 35
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. TUCKER, RON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 748 BLOOMFIELD RD

City HENDRIX	State OK	Zip Code 74741
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) INFORMATION REQUESTED
------------------------------------------------------------	------------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2020

Transaction ID : A5C86595883D14252B31

Amount of Each Receipt this Period
300.00

Memo Item

B. VANDERWOUDE, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 83

City ZEELAND	State MI	Zip Code 49464
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) INFORMATION REQUESTED
------------------------------------------------------------	------------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2020

Transaction ID : ADA1C12C47DB94360B33

Amount of Each Receipt this Period
250.00

Memo Item

C. VOYLES, STEPHEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 544

City FENTON	State MO	Zip Code 63026
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) EXECUTIVE
----------------------------------------------------	------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2020

Transaction ID : AAF02A34BAC9349B78DF

Amount of Each Receipt this Period
400.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 OF 35
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. WETZEL, JACK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 494 POWDER HOUSE RD
 City AIKEN State SC Zip Code 29801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 17 / 2020
Transaction ID : A281CBEE37C94071AF0
 Amount of Each Receipt this Period 400.00
 Memo Item

B. WOODHOUSE, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 650 RAMBLEWOOD RD.
 City HOUSTON State TX Zip Code 77079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2020
Transaction ID : A8773F0D167E34993871
 Amount of Each Receipt this Period 250.00
 Memo Item

C. WOODHOUSE, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 650 RAMBLEWOOD RD.
 City HOUSTON State TX Zip Code 77079
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2020
Transaction ID : AD59C286E16F34B64B15
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	42870.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 35
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. NATIONAL ASSOCIATION FOR GUN RIGHTS INC. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2300 W EISENHOWER BLVD

City LOVELAND	State CO	Zip Code 80537-3150
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00481200

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2020

Transaction ID : A4EFEEA7F57C34323846

Amount of Each Receipt this Period
25000.00

Memo Item

B.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	25000.00
TOTAL This Period (last page this line number only).....	25000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

Full Name (Last, First, Middle Initial)

A. DELUXE BUSINESS FORMS

Mailing Address PO BOX 742572

City CINCINNATI State OH Zip Code 54274

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2020

FEC Identification Number

C
Transaction ID : B656388FFD
 Amount of Each Disbursement this Period
 59.82

Memo Item

Full Name (Last, First, Middle Initial)

B. RALLY PAY

Mailing Address 995 MARKET STREET, FLOOR 2

City SAN FRANCISCO State CA Zip Code 94103-1732

Purpose of Disbursement PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2020

FEC Identification Number

C
Transaction ID : B24B9C63FD
 Amount of Each Disbursement this Period
 30.28

Memo Item

Full Name (Last, First, Middle Initial)

C. RALLY PAY

Mailing Address 995 MARKET STREET, FLOOR 2

City SAN FRANCISCO State CA Zip Code 94103-1732

Purpose of Disbursement PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) ▼
 State: District:

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2020

FEC Identification Number

C
Transaction ID : B3BA4A644E
 Amount of Each Disbursement this Period
 1.80

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

91.90

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. RALLY PAY

Full Name (Last, First, Middle Initial)

Mailing Address 995 MARKET STREET, FLOOR 2

City SAN FRANCISCO State CA Zip Code 94103-1732

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 09 / 2020

FEC Identification Number: C

Transaction ID : B9B15F4726

Amount of Each Disbursement this Period: 28.35

Memo Item

B. RALLY PAY

Full Name (Last, First, Middle Initial)

Mailing Address 995 MARKET STREET, FLOOR 2

City SAN FRANCISCO State CA Zip Code 94103-1732

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 14 / 2020

FEC Identification Number: C

Transaction ID : B0C70F80EF

Amount of Each Disbursement this Period: 11.56

Memo Item

C. RALLY PAY

Full Name (Last, First, Middle Initial)

Mailing Address 995 MARKET STREET, FLOOR 2

City SAN FRANCISCO State CA Zip Code 94103-1732

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 16 / 2020

FEC Identification Number: C

Transaction ID : B4B8729B25

Amount of Each Disbursement this Period: 19.35

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 59.26

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

Full Name (Last, First, Middle Initial)

A. RALLY PAY

Mailing Address 995 MARKET STREET, FLOOR 2

City SAN FRANCISCO State CA Zip Code 94103-1732

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B93BEF0710
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. RALLY PAY

Mailing Address 995 MARKET STREET, FLOOR 2

City SAN FRANCISCO State CA Zip Code 94103-1732

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BC811D928E
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. RALLY PAY

Mailing Address 995 MARKET STREET, FLOOR 2

City SAN FRANCISCO State CA Zip Code 94103-1732

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B59F597C5E
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

Full Name (Last, First, Middle Initial)

A. RALLY PAY

Mailing Address 995 MARKET STREET, FLOOR 2

City SAN FRANCISCO State CA Zip Code 94103-1732

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2020

FEC Identification Number

C
Transaction ID : **B4A387EC13**
Amount of Each Disbursement this Period
40.35

Memo Item

Full Name (Last, First, Middle Initial)

B. RALLY PAY

Mailing Address 995 MARKET STREET, FLOOR 2

City SAN FRANCISCO State CA Zip Code 94103-1732

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2020

FEC Identification Number

C
Transaction ID : **B952DE0334E**
Amount of Each Disbursement this Period
3.54

Memo Item

Full Name (Last, First, Middle Initial)

C. RALLY PAY

Mailing Address 995 MARKET STREET, FLOOR 2

City SAN FRANCISCO State CA Zip Code 94103-1732

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2020

FEC Identification Number

C
Transaction ID : **B9D43E52D4**
Amount of Each Disbursement this Period
7.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

51.39
734.37

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 27 OF 35
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NATIONAL ASSOCIATION FOR GUN RIGHTS			Nature of Debt (Purpose): ONLINE VOTER CONTACT
Mailing Address 2300 W EISENHOWER BLVD			
City LOVELAND	State CO	Zip Code 80537-3150	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D78046369ABB54C219BD	
Amount Incurred This Period 323.97	Payment This Period 0.00	Outstanding Balance at Close of This Period 323.97

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NATIONAL ASSOCIATION FOR GUN RIGHTS			Nature of Debt (Purpose): FUNDRAISING EMAILS
Mailing Address 2300 W EISENHOWER BLVD			
City LOVELAND	State CO	Zip Code 80537-3150	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D25AB4BF4DE0C4A5A96E	
Amount Incurred This Period 703.66	Payment This Period 0.00	Outstanding Balance at Close of This Period 703.66

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NATIONAL ASSOCIATION FOR GUN RIGHTS			Nature of Debt (Purpose): ONLINE VOTER CONTACT
Mailing Address 2300 W EISENHOWER BLVD			
City LOVELAND	State CO	Zip Code 80537-3150	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D1D262A7E989841039B6	
Amount Incurred This Period 147.95	Payment This Period 0.00	Outstanding Balance at Close of This Period 147.95

1) SUBTOTALS This Period This Page (optional)..... ▶	1175.58
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 28 OF 35
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NATIONAL ASSOCIATION FOR GUN RIGHTS		Nature of Debt (Purpose): ONLINE VOTER CONTACT	
Mailing Address 2300 W EISENHOWER BLVD			
City LOVELAND	State CO	Zip Code 80537-3150	

Outstanding Balance Beginning This Period	Transaction ID : DD22FBD6849F84239970	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="123.52"/>	<input type="text" value="0.00"/>	<input type="text" value="123.52"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NATIONAL ASSOCIATION FOR GUN RIGHTS		Nature of Debt (Purpose): ONLINE VOTER CONTACT	
Mailing Address 2300 W EISENHOWER BLVD			
City LOVELAND	State CO	Zip Code 80537-3150	

Outstanding Balance Beginning This Period	Transaction ID : D83DFAF4C8158498B9BF	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="123.65"/>	<input type="text" value="0.00"/>	<input type="text" value="123.65"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NATIONAL ASSOCIATION FOR GUN RIGHTS		Nature of Debt (Purpose): ONLINE VOTER CONTACT	
Mailing Address 2300 W EISENHOWER BLVD			
City LOVELAND	State CO	Zip Code 80537-3150	

Outstanding Balance Beginning This Period	Transaction ID : D3727635C21814877BE5	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="27.19"/>	<input type="text" value="0.00"/>	<input type="text" value="27.19"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="274.36"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="1449.94"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="1449.94"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA
FEC IDENTIFICATION NUMBER
C C00742635

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: CDR COMMUNICATIONS, INC.
Mailing Address: 9310 OLD KEENE MILL RD, STE B, BURKE, VA, 22015-4281
Purpose of Expenditure: PMT FOR EST FROM 9/3/2020. TV ADVERTISING PRODUCTION
Name of Federal Candidate: BIDEN, JOSEPH, R., JR.
Amount: 3385.77
Transaction ID: EEDCA6B9D1F164B31B63

Full Name of Payee: CDR COMMUNICATIONS, INC.
Mailing Address: 9310 OLD KEENE MILL RD, STE B, BURKE, VA, 22015-4281
Purpose of Expenditure: PMT FOR EST FROM 9/3/2020. TV ADVERTISING PRODUCTION
Name of Federal Candidate: CUNNINGHAM, CAL., ,
Amount: 3385.77
Transaction ID: E4A346FFC8E7144629A6

(a) SUBTOTAL of Itemized Independent Expenditures: 6771.54
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, ,

[Electronically Filed]

Date 10 / 19 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA
FEC IDENTIFICATION NUMBER
C C00742635

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: CDR COMMUNICATIONS, INC.
Mailing Address: 9310 OLD KEENE MILL RD, STE B, BURKE, VA, 22015-4281
Purpose of Expenditure: PMT FOR EST FROM 9/3/2020. TV ADVERTISING PRODUCTION
Name of Federal Candidate: COLLINS, SUSAN, M., Oppose
Amount: 3385.77
Transaction ID: E0B3DFDB79A724F078BB
Date of Disbursement or Obligation: 09/11/2020

Full Name of Payee: CDR COMMUNICATIONS, INC.
Mailing Address: 9310 OLD KEENE MILL RD, STE B, BURKE, VA, 22015-4281
Purpose of Expenditure: PMT FOR EST FROM 9/3/2020. TV ADVERTISING PRODUCTION
Name of Federal Candidate: HICKENLOOPER, JOHN, W., Oppose
Amount: 3385.77
Transaction ID: E63B3C3D2E2CE42D5BC
Date of Disbursement or Obligation: 09/11/2020

(a) SUBTOTAL of Itemized Independent Expenditures: 6771.54
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, ,

[Electronically Filed]

Date 10/19/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA
FEC IDENTIFICATION NUMBER
C C00742635

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: CDR COMMUNICATIONS, INC.
Mailing Address: 9310 OLD KEENE MILL RD, STE B, BURKE, VA, 22015-4281
Purpose of Expenditure: PMT FOR EST FROM 9/3/2020. TV ADVERTISING PRODUCTION
Name of Federal Candidate: KELLY, MARK, , ,
Disbursement For: General 2020

Full Name of Payee: CDR COMMUNICATIONS, INC.
Mailing Address: 9310 OLD KEENE MILL RD, STE B, BURKE, VA, 22015-4281
Purpose of Expenditure: PMT FOR EST FROM 9/3/2020. TV ADVERTISING PRODUCTION
Name of Federal Candidate: SHAHEEN, JEANNE, , ,
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures: 6771.54
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date 10 / 19 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA
FEC IDENTIFICATION NUMBER
C C00742635

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
CDR COMMUNICATIONS, INC.
Mailing Address
9310 OLD KEENE MILL RD
STE B
City
BURKE
State
VA
Zip Code
22015-4281
Purpose of Expenditure
PMT FOR EST FROM 9/3/2020. TV ADVERTISING PRODUCTION
Category/Type
Name of Federal Candidate:
PETERS, GARY, ,
Office Sought:
Senate
State: MI
Disbursement For:
General
Amount
3385.77
Transaction ID: E2F788E65B6484D15AF4
Date of Disbursement or Obligation
09/11/2020

Full Name of Payee
CDR COMMUNICATIONS, INC.
Mailing Address
9310 OLD KEENE MILL RD
STE B
City
BURKE
State
VA
Zip Code
22015-4281
Purpose of Expenditure
PMT FOR EST FROM 9/3/2020. TV ADVERTISING PRODUCTION
Category/Type
Name of Federal Candidate:
JONES, DOUG, ,
Office Sought:
Senate
State: AL
Disbursement For:
General
Amount
3385.77
Transaction ID: E1F6E341C2507429CB8C
Date of Disbursement or Obligation
09/11/2020

(a) SUBTOTAL of Itemized Independent Expenditures 6771.54
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, ,
Signature

[Electronically Filed]

Date 10/19/2020

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) GUN RIGHTS AMERICA	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00742635 </div>
----------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item NATIONAL ASSOCIATION FOR GUN RIGHTS			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 09 / 18 / 2020
Mailing Address 2300 W EISENHOWER BLVD			Amount 323.97
City LOVELAND	State CO	Zip Code 80537-3150	
Purpose of Expenditure ONLINE VOTER CONTACT; NOT YET PAID AND REPORTED ON SCHEDULE D.		Category/Type 	Transaction ID : ECAD702D4513C4780A7E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y
Name of Federal Candidate: BIDEN, JOSEPH, R, , JR.		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 3709.74		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input checked="" type="checkbox"/> Memo Item NATIONAL ASSOCIATION FOR GUN RIGHTS			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y 09 / 19 / 2020
Mailing Address 2300 W EISENHOWER BLVD			Amount 147.95
City LOVELAND	State CO	Zip Code 80537-3150	
Purpose of Expenditure ONLINE VOTER CONTACT; NOT YET PAID AND REPORTED ON SCHEDULE D.		Category/Type 	Transaction ID : E4798E4E9EB0E4686B29 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y
Name of Federal Candidate: HICKENLOOPER, JOHN, W, ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 3533.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date M M / D D / Y Y Y Y Y
10 / 19 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA
FEC IDENTIFICATION NUMBER
C C00742635

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee NATIONAL ASSOCIATION FOR GUN RIGHTS
Mailing Address 2300 W EISENHOWER BLVD
City LOVELAND State CO Zip Code 80537-3150
Purpose of Expenditure ONLINE VOTER CONTACT; NOT YET PAID AND REPORTED ON SCHEDULE D.
Name of Federal Candidate: KELLY, MARK, ,
Calendar Year-To-Date Per Election for Office Sought 3509.42
Disbursement For: 2020 General

Full Name of Payee NATIONAL ASSOCIATION FOR GUN RIGHTS
Mailing Address 2300 W EISENHOWER BLVD
City LOVELAND State CO Zip Code 80537-3150
Purpose of Expenditure ONLINE VOTER CONTACT; NOT YET PAID AND REPORTED ON SCHEDULE D.
Name of Federal Candidate: SHAHEEN, JEANNE, ,
Calendar Year-To-Date Per Election for Office Sought 3509.29
Disbursement For: 2020 General

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, ,

[Electronically Filed]

Date

10 / 19 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
GUN RIGHTS AMERICA
FEC IDENTIFICATION NUMBER
C C00742635

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee NATIONAL ASSOCIATION FOR GUN RIGHTS
Mailing Address 2300 W EISENHOWER BLVD
City LOVELAND State CO Zip Code 80537-3150
Purpose of Expenditure ONLINE VOTER CONTACT; NOT YET PAID AND REPORTED ON SCHEDULE D.
Name of Federal Candidate: JONES, DOUG, ,
Calendar Year-To-Date Per Election for Office Sought 3412.96
Disbursement For: General 2020

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure
Name of Federal Candidate:
Calendar Year-To-Date Per Election for Office Sought
Disbursement For: Primary General Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 27086.16

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, ,

[Electronically Filed]

Date 10 / 19 / 2020

Signature